

**DEPARTMENT OF SOCIAL AND HEALTH SERVICES
MEDICAL ASSISTANCE ADMINISTRATION
Olympia, Washington**

To: Chiropractors
Managed Care Plans

Memorandum No: 05-39 MAA
Issued: June 28, 2005

From: Douglas Porter, Assistant Secretary
Medical Assistance Administration (MAA)

For Information Call:
(800) 562-6188

Supersedes # Memorandum:
04-34

Subject: Chiropractic Services for Children: Fee Schedule Changes

Effective for dates of service on and after July 1, 2005, the Medical Assistance Administration (MAA) will implement:

- The updated Medicare Physician Fee Schedule Data Base (MPFSDB) Year 2005 relative value units (RVUs);
- One (1.0) percent vendor rate increase.

Maximum Allowable Fees

MAA is updating the Chiropractic Services fee schedule with Year 2005 RVUs. The 2005 Washington State Legislature appropriated a one (1.0) percent vendor rate increase for the 2006 state fiscal year. The maximum allowable fees have been adjusted to reflect these changes.

Attached are updated replacement pages 7/8 for MAA's current *Chiropractic Services for Children Billing Instructions*.

Bill MAA your usual and customary charge.

Diagnosis Reminder

MAA requires valid and complete ICD-9-CM diagnosis codes. When billing MAA, use the highest level of specificity (4th or 5th digits if necessary) or the entire claim will be denied.

MAA's Provider Issuances

To view and download MAA's numbered memoranda and billing instructions electronically, visit MAA's website at <http://maa.dshs.wa.gov> (select the *Billing Instructions/Numbered Memoranda* link).

To request a free paper copy from the Department of Printing:

1. **Go to:** <http://www.prt.wa.gov> (Orders filled daily).
 - a) Click *General Store*.
 - b) If a **Security Alert** screen is displayed, click **OK**.
 - i. Select either *I'm New* or *Been Here*.
 - ii. If new, fill out the registration and click *Register*.
 - iii. If returning, type your email and password and then click *Login*.
 - c) At the **Store Lobby** screen, click *Shop by Agency*. Select *Department of Social and Health Services* and then select *Medical Assistance*.
 - d) Select *Billing Instructions, Forms, Healthy Options, Numbered Memo, Publications, or Issuance Correction*. You will then need to select a year and the select the item by number and title.
2. **Fax/Call:** Dept. of Printing/Attn: Fulfillment at FAX (360) 586-6361/ telephone (360) 586-6360. (Orders may take up to 2 weeks to fill.)

Coverage

What is covered?

The Medical Assistance Administration (MAA) will pay only for the following:

- Unlimited chiropractic manipulative treatments of the spine; and
- X-rays of the spine limited to:
 - ✓ A single view when the treatment area can be isolated; and
 - ✓ The cervical, thoracic, and lumbo-sacral (anterior-posterior and lateral) areas of the spine when treatment cannot be isolated.



Note: MAA does not reimburse for the following items under the Chiropractic Services for Children program:

- Therapy modalities such as light, heat, hydro, and physical;
- Any food supplements, medications, or drugs; and
- Any braces, cervical collars, or supplies.

Fee Schedule

The following chiropractic services are allowed only for clients under 21 years of age with a referral from an EPSDT provider.

Due to its licensing agreement with the American Medical Association, MAA publishes only the official, brief CPT™ procedure code descriptions.

To view the entire description, please refer to your current CPT book.

Procedure Code	Modifier	Brief Description	July 1, 2005 Max Allowable	
			NFS	FS
98940		Chiropractic manipulation	\$15.67	
98941		Chiropractic manipulation	22.03	
98942		Chiropractic manipulation	28.61	
72020		X-ray exam of spine	14.76	
72020	26	Professional component	4.77	
72020	TC	Technical component	9.99	
72040		X-ray exam of neck spine	21.35	
72040	26	Professional component	6.81	
72040	TC	Technical component	14.53	
72070		X-ray of thoracic spine	22.48	
72070	26	Professional component	6.81	
72070	TC	Technical component	15.67	
72100		X-ray of lower spine	22.94	
72100	26	Professional component	6.81	
72100	TC	Technical component	16.12	

Modifiers

- Professional Component only (modifier 26)** – This modifier identifies the x-ray professional component only. When the professional component (reading and interpretation of the x-ray) is performed separately, the service must be billed along with modifier 26.
- Technical Component only (modifier TC)** – This modifier identifies the x-ray technical component only. When the technical component (taking of the x-ray) is performed separately, the service must be billed along with modifier TC.

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(Revised June 2005)

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Fee Schedule